Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)					CALIFORNIA FORM 460			
	Statement covers period from07/01/2022	Date of election if applicable: (Month, Day, Year)	2023 JAN 12 PI	M 2: 10 Page	of12 For Official Use Only			
SEE INSTRUCTIONS ON REVERSE	through12/31/2022	11/03/2020	CAMPAIGN FI	NANCE	Contraction of the			
1. Type of Recipient Committee: All Committees - C	omplete Parts 1, 2, 3, and 4.	2. Type of Statement:						
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee O Controlled O Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	 Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T Amendment (Explain t) 	t [ermination)	Quarterly Stat Special Odd- Supplemental Statement - A	Year Report			
3. Committee Information	.D. NUMBER	Treasurer(s)						
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE	1428774	NAME OF TREASURER						
Gina Ramirez for Little Lake City School Bo	ard 2020	Gina Ramirez						
		MAILING ADDRESS						
STREET ADDRESS (NO P.O. BOX)	······································	CITY	STATE	ZIP CODE	AREA CODE/PHONE			
		Norwalk	CA	90650	(562)716-7071			
CITY STATE ZIP C	ODE AREA CODE/PHONE	NAME OF ASSISTANT TREASU	RER, IF ANY					
Norwalk CA 906		David L. Gould						
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	BOX	MAILING ADDRESS						
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE			
		Norwalk	CA	90650	(213) 489-4792			
OPTIONAL: FAX / E-MAIL ADDRESS (213)489-4818 / dlgould@gouldorellana.com		OPTIONAL: FAX / E-MAIL ADD	RESS		······			
 Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californ Executed on		nowledge the information contained he	rein and in the attached	d schedules is true	e and complete. I certify			

Signature of Cor

By.

fidate, State Measure Proponent

Executed on _

Executed on _

Date

Date

Date

Signature of Controlling Officeholder, Candidate, State Measure Proponent FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Recipient Committee Campaign Statement Cover Page — Part 2

5. Officeholder or Candidate Controlled Committee

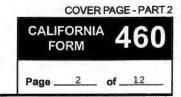
NAME OF OFFICEHOLDER OR CANDIDATE

Gina Ramirez

	Norwalk	CA	90650			
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP			
Board of Education Little Lake Board District 5						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)						

Related Committees Not Included in this Statement: LIst any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME		I.D. NUN	IBER
NAME OF TREASURER			
COMMITTEE ADDRESS	STREET ADDRESS (I	NO P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE
COMMITTEE NAME		I.D. NUN	IBER
NAME OF TREASURER			
COMMITTEE ADDRESS	STREET ADDRESS (M	NO P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE



6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	U SUPPORT
		1-

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HI	ELD	DISTRICT NO. IF ANY	

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page		nounts may be round to whole dollars.	Jale			ment covers period	CALIFORNIA FORM
SEE INSTRUCTIONS ON REVERSE					through	12/31/2022	_ Page3 of12
NAME OF FILER							I.D. NUMBER
Gina Ramirez for Little Lake City School Board 2020							1428774
Contributions Received	(F	Column A Total This Period ROMATTACHED SCHEDULES)		Column CALENDAR YE TOTAL TO DAT	AR		mmary for Candidates the State Primary and
1. Monetary Contributions Schedule A, Line 3	\$	5,000.00	\$	23,0	59.00		
2. Loans Received Schedule B, Line 3		0.00		5,0	00.00	1/1	through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	5,000.00	\$	28,0	059.00	20. Contributions Received \$	\$
4. Nonmonetary Contributions Schedule C, Line 3		0.00			0.00	21. Expenditures	φ
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	5,000.00	\$	28,0	059.00	Made \$	\$
Expenditures Made						Expenditure Limit	Summary for State
6. Payments Made Schedule E, Line 4	\$	6,809.42	\$	14,3	32.92	Candidates	
7. Loans Made Schedule H, Line 3		0.00			0.00	22 Cumulat	ive Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	6,809.42	\$	14,3	332.92		to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00			0.00	Date of Election	Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00			0.00	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	6,809.42	\$	14,3	332.92		\$
Current Cash Statement			Г			//////	\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	14,787.25	Т	o calculate Colum	n B, add		
13. Cash Receipts Column A, Line 3 above		5,000.00	a	mounts in Column	A to the		
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00		orresponding amore om Column B of y		*Amounts in this section reported in Column B.	may be different from amounts
15. Cash Payments Column A, Line 8 above		6,809.42		olumn A may be			
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	12,977.83	fig	gures that should	be		
If this is a termination statement, Line 16 must be zero.			р	ubtracted from pr eriod amounts. If	this is		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	the first report being filed for this calendar year, only carry over the amounts				
Cash Equivalents and Outstanding Debts			fr	om Lines 2, 7, an ny).			
18. Cash Equivalents See Instructions on reverse							
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	5,000.00					

Schedule A Monetary Contributions Received			s may be rounded whole dollars.				LIFORNIA 460	
	ONS ON REVERSE		through _12/31/2	022	Page _	4 of 12		
NAME OF FILER						I.D. NUM	ABER	
Gina Ramire	z for Little Lake City School Board 2020					14287	74	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
08/16/2022	Sinanian Tarzana, CA 91356	IND COM XOTH PTY SCC		5,000.00	5	,000.00		
		DIND COM OTH PTY SCC						
		□IND □COM □OTH □PTY □SCC						
		DIND COM OTH PTY SCC						
		DIND COM OTH PTY SCC						
			SUBTOTAL	\$ 5,000.00	J	and all more days	-	
1. Amount re	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	5,000.00	INC			
	ceived this period – uniternized monetary contributions	of less than \$	100\$	0.00	PT	H - Other (Y - Political	e.g., business entity)	
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colur	nn A, Line 1.).		5,000.00	LSC	C-Smail Co		

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

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SCHEDULE B-PART 1 Schedule B – Part 1 Statement covers period Amounts may be rounded CALIFORNIA 460 Loans Received to whole dollars. FORM 07/01/2022 from through ______12/31/2022 of ______ Page 5 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Gina Ramirez for Little Lake City School Board 2020 1428774 (d) OUTSTANDING (f) (g) (a) OUTSTANDING (b) (e) (c) IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE CUMULATIVE AMOUNT INTEREST ORIGINAL AMOUNT PAID OCCUPATION AND EMPLOYER BALANCE **BALANCEAT** OF LENDER **RECEIVED THIS** PAID THIS AMOUNT OF CONTRIBUTIONS **OR FORGIVEN** (IF SELF-EMPLOYED, ENTER **BEGINNING THIS** CLOSE OF THIS (IF COMMITTEE, ALSO ENTER I.D. NUMBER) TO DATE PERIOD PERIOD LOAN NAME OF BUSINESS) THIS PERIOD PERIOD PERIOD Rick Ramirez for Norwalk City Council 2020 (ID# CALENDAR YEAR PAID 1421164) Long Beach, CA 90802 0.00 \$____0.00 \$ _5.000.00 0.00% \$ 5.000.00 RATE PER ELECTION** FORGIVEN 10/23/2020 \$ 5,000.00 0.00 0 00 5 0 00 DATE INCURRED TO IND DATE DUE COM OTH PTY SCC CALENDAR YEAR PAID \$ s RATE PER ELECTION ** FORGIVEN s \$ DATE INCURRED DATE DUE TO IND COM OTH PTY SCC CALENDAR YEAR PAID RATE FORGIVEN PER ELECTION ** TO IND COM OTH OTY SCC DATE DUE DATE INCURRED SUBTOTALS \$ 0.00\$ 0.00\$ 5,000.00\$ 0.00 (Enter (e) on Schedule B Summary Schedule E. Line 3) 1. Loans received this period 0.00 (Total Column (b) plus uniternized loans of less than \$100.) **†Contributor Codes** IND - Individual 0.00 2. Loans paid or forgiven this period COM - Recipient Committee (other than PTY or SCC) (Total Column (c) plus loans under \$100 paid or forgiven.) OTH - Other (e.g., business entity) (Include loans paid by a third party that are also itemized on Schedule A.) PTY - Political Party SCC - Small Contributor Committee 3. Net change this period. (Subtract Line 2 from Line 1.)..... NET \$ _ 0.00 (May be a negative number) Enter the net here and on the Summary Page, Column A, Line 2, *Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required. FPPC Form 460 (Jan/2016)

Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Amounts may be ro to whole dollar		Statement covers		CALIFORNIA FORM 460	
	IONS ON REVERSE			through12/31/20	22	Page	6 of
NAME OF FILER Gina Ramire	ez for Little Lake City School Board 2020					I.D. NUMBE	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE 1 CALENDAR (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)
09/13/2022	Gary Clifford Board of Education Glendora Unif.Sch.Dist. X Support Oppose	 Monetary Contribution Nonmonetary Contribution Independent Expenditure 		500.00		500.00	
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
		Monetary Contribution Nonmonetary Contribution					0
	Support Oppose	Expenditure					

Schedule D Summary

1.	. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)
2.	. Unitemized contributions and independent expenditures made this period of under \$100 \$0.00
3.	. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)

Schedule E	Amounts may be rounded	Statement covers period CALIFORNIA						
Payments Made	to whole dollars.	from07/01/2022	FORM 400					
SEE INSTRUCTIONS ON REVERSE		through12/31/2022	_ Page _7 of12					
NAME OF FILER			I.D. NUMBER					
Gina Ramirez for Little Lake City School Boar	d 2020		1428774					

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

OMP	campaign paraphemalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research		staff/spouse travel, lodging, and meals
ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)		voter registration
ш	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Gould & Orellana, LLC Norwalk, CA 90650	PRO		150.00
Salena Villa Sana Fe Springs, CA 90670	OFC		1,436.49
Norwalk Lions Club Norwalk, CA 90650	cvc		150.00
* Payments that are contributions or independent expenditures must a	liso be summarized on Schedule I	D. SU	BTOTAL\$ 1,736.49

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) \$	6,734.42
2. Unitemized payments made this period of under \$100 \$	75.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	6,809.42

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Gina Ramirez for Little Lake City School Board 2020	Amounts may be rounded to whole dollars.		t covers period 7/01/2022 CALIFO FOR	8 of 12 BER
CODES: If one of the following codes accurately describes the CMP campaign paraphernalia/misc. MBR CNS campaign consultants MTC CTB contribution (explain nonmonetary)* OFC CVC civic donations PET FIL candidate filing/ballot fees PHC FND fundraising events POL ND independent expenditure supporting/opposing others (explain)* POS LEG legal defense PRC LIT campaign literature and mailings PRT	R member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and mess professional services (legal	RAD radio a RFD returne SAL campa TEL t.v. or o TRC candid TRS staff/sp enger services TSF transfe accounting) VOT voter m	ibe the payment. irtime and production costs id contributions ign workers' salaries cable airtime and production cost ate travel, lodging, and meals rouse travel, lodging, and meals r between committees of the sa egistration ation technology costs (internet, or attention technology costs (internet, or internet)	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OF	DESCRIPTION OF PAY	MENT	AMOUNT PAID
Gould & Orellana. LLC Norwalk, CA 90650	PRO			150.00
Gould & Orellana. LLC Norwalk, CA 90650	PRO			150.00
Garv Clifford for Glendora Unified School District 2022 (ID Riverside, CA 92501	1449045) CTB			500.00
Kelsy Medrano Garden Grove, CA 92843	CMP			1,750.00
Gould & Orellana, LLC Norwalk, CA 90650	PRO			150.00
* Payments that are contributions or independent expenditures must also be s	ummarized on Schedule D.		SUBTOTAL	\$ 2,700.00

Schedule E		SCHEDULI			
(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	State	ement covers period	CALIFORNIA FORM 460	
SEE INSTRUCTIONS ON REVERSE		through	12/31/2022	- Page 9 of 12	
NAME OF FILER				I.D. NUMBER	
				1420774	
Gina Ramirez for Little Lake City School Board 2020				1428774	
Internet and the second s	cribes the payment you may enter the code	Otherwise, d	escribe the payme		
CODES: If one of the following codes accurately des	cribes the payment, you may enter the code		escribe the payme	nt.	
Internet and the second s		RAD ra		nt.	
CODES: If one of the following codes accurately des CMP campaign paraphemalia/misc.	MBR member communications MTG meetings and appearances OFC office expenses	RAD ra RFD re SAL ca	adio airtime and product aturned contributions ampaign workers' salar	nt. tion costs ies	
CODES: If one of the following codes accurately des CMP campaign paraphemalia/misc. CNS campaign consultants	MBR member communications MTG meetings and appearances	RAD ra RFD re SAL ca TEL t	adio airtime and product eturned contributions ampaign workers' salar v. or cable airtime and p	nt. tion costs ties production costs	
CODES: If one of the following codes accurately des CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)*	MBR member communications MTG meetings and appearances OFC office expenses	RAD ra RFD re SAL ca TEL ta TRC ca	adio airtime and product aturned contributions ampaign workers' salar v. or cable airtime and p andidate travel, lodging,	nt. Hon costs ies production costs and meals	
CODES: If one of the following codes accurately des CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating	RAD ra RFD re SAL c TEL t TRC c TRS st	adio airtime and product aturned contributions ampaign workers' salar v. or cable airtime and p andidate travel, lodging, taff/spouse travel, lodging	nt. tion costs production costs and meals ng, and meals	
CODES: If one of the following codes accurately des CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research	RAD ra RFD re SAL c TEL t. TRC c TRS st	adio airtime and product aturned contributions ampaign workers' salar v. or cable airtime and p andidate travel, lodging, taff/spouse travel, lodging	nt. Hon costs ies production costs and meals	
CODES: If one of the following codes accurately des CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research	RAD ra RFD re SAL ca TEL ta TRC ca TRS st rs TSF tr	adio airtime and product aturned contributions ampaign workers' salar v. or cable airtime and p andidate travel, lodging, taff/spouse travel, lodging	nt. tion costs production costs and meals ng, and meals	

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DES	CRIPTION OF PAYMENT AMOUNT PAID
Alexander Hernandez Norwalk, CA 90650	LIT	340.00
Gould & Orellana, LLC Norwalk, CA 90650	PRO	150.00
Brando Ramirez Norwalk, CA 90650	OFC	445.49
Gould & Orellana, LLC Norwalk, CA 90650	PRO	150.00
Brando Ramirez Norwalk, CA 90650	OFC	198.94
* Payments that are contributions or independent expenditures must also be	e summarized on Schedule D.	SUBTOTAL \$ 1,284.43

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Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Gina Ramirez for Little Lake City School Board 2020	Amounts may to whole d			Statement covers period from 07/01/2022 through 12/31/2022	SCHEDULE E (CON CALIFORNIA 460 FORM 460 Page 10 of 12 I.D. NUMBER 1428774
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member con MTG meetings at OFC office expe PET petition circ PHO phone bank POL polling and POS postage, de	nmunications nd appearances nses ulating s	ger services	RAD radio airtime and production RFD returned contributions SAL campaign workers' salarie TEL t.v. or cable airtime and pr TRC candidate travel, lodging, a TRS staff/spouse travel, lodging	on costs roduction costs and meals g, and meals ses of the same candidate/sponso
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DE	SCRIPTION OF PAYMENT	AMOUNT PAID
Brando Ramirez t Norwalk, CA 90650		OFC			547.5
Marilvn Villa Santa Fe Springs, CA 90670		OFC			250.1
Alexander Hernandez		LIT			216.
Norwalk, CA 90650					
* Payments that are contributions or independent expenditures must also	be summarized or	Schedule D.		s	SUBTOTAL \$ 1,013.

Schedule G					SCHEDULE G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)		Amounts may be rounded to whole dollars.	fro	Statement covers period m07/01/2022	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE			thr	ough <u>12/31/2022</u>	Page 11 of 12
NAME OF FILER					I.D. NUMBER
Gina Ramirez for Little Lake City School Board 2020					1428774
Brando Ramirez CODES: If one of the following codes accurately describ	es the	payment, you may enter the code.	Otherwis	e, describe the paymer	nt.
CMP campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production	costs
CNS campaign consultants	MTG	meetings and appearances	RFD	returned contributions	
CTB contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries	
CVC civic donations	PET	petition circulating	TEL	t.v. or cable airtime and pro	
FIL candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, an	
FND fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging,	
ND independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF		es of the same candidate/sponsor
LEG legal defense	PRO	professional services (legal, accounting)	VOT	voter registration	
LT campaign literature and mailings	PRT	print ads	WEB	information technology cost	s (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Cigar Time Inc.	FND	· · · · · · · · · · · · · · · · · · ·	547.50
Cerritos, CA 90703			
Attach additional Information on appropriately labeled continuation s	heets.		TOTAL* \$ 547.50

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)		Amounts may be rounded to whole dollars.	fro	Statement covers period m07/01/2022	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE			thr	ough <u>12/31/2022</u>	Page 12 of 12
NAME OF FILER					I.D. NUMBER
Gina Ramirez for Little Lake City School Board 2020					1428774
CODES: If one of the following codes accurately describ	bes the				
CMP campaign paraphernalia/misc.	MBR	member communications		radio airtime and production	costs
CNS campaign consultants CTB contribution (explain nonmonetary)*	OFC	meetings and appearances office expenses	RFD	returned contributions campaign workers' salaries	
CTB contribution (explain nonmonetary)* CVC civic donations	PET	petition circulating	TEL	t.v. or cable airtime and proc	
FIL candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and	
FND fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging,	
ND independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committee	s of the same candidate/sponsor
LEG legal defense	PRO	professional services (legal, accounting)	VOT	voter registration	
LIT campaign literature and mailings	PRT	print ads	WEB	information technology costs	s (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Best Buv	OFC		1,436.49
Cerritos, CA 90703			
Attach additional information on appropriately labeled continuation s	heets.		TOTAL* \$ 1,436.49

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.